

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>	<b>Application Number</b>	10/553,373	
	<b>Filing Date</b>	(Int'l) April 16, 2004	
	<b>First Named Inventor</b>	Paul TARDI	
	<b>Art Unit</b>	1612	
	<b>Examiner Name</b>	G. Kishore	
<b>Total Number of Pages in This Submission</b>	5	<b>Attorney Docket Number</b>	532552000102

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement – Supplemental (3 pages)  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD  <div style="border: 1px solid black; padding: 2px; width: fit-content;">Remarks</div> <p>Customer No. 25225</p>	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p>Form SB/08a/b (1 page) References (5)</p>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
<b>Firm Name</b>	MORRISON & FOERSTER LLP		
<b>Signature</b>	/Kate H. Murashige/		
<b>Printed name</b>	Kate H. Murashige		
<b>Date</b>	January 15, 2010	<b>Reg. No.</b>	29,959